

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re:

CHERISE SIMONE JACKSON

Debtor(s)

Case No. 16-00979

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 01/13/2016.
- 2) The plan was confirmed on 03/28/2016.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was dismissed on 07/25/2016.
- 6) Number of months from filing to last payment: 6.
- 7) Number of months case was pending: 9.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: NA.
- 10) Amount of unsecured claims discharged without payment: \$0.00.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor	\$3,364.00
Less amount refunded to debtor	\$464.00

NET RECEIPTS: \$2,900.00

Expenses of Administration:

Attorney's Fees Paid Through the Plan	\$2,763.75
Court Costs	\$0.00
Trustee Expenses & Compensation	\$136.25
Other	\$0.00

TOTAL EXPENSES OF ADMINISTRATION: \$2,900.00

Attorney fees paid and disclosed by debtor: \$789.00

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ALCOA BILLING CENTER	Unsecured	48.00	NA	NA	0.00	0.00
CAPITAL ONE BANK USA	Unsecured	374.00	382.02	382.02	0.00	0.00
Choice Recovery	Unsecured	60.00	NA	NA	0.00	0.00
Choice Recovery	Unsecured	73.00	NA	NA	0.00	0.00
CITY OF COUNTRY CLUB HILLS	Unsecured	100.00	NA	NA	0.00	0.00
COMPREHENSIVE PAIN CARE	Unsecured	706.66	NA	NA	0.00	0.00
DERMATOLOGIST ASSOCIATES	Unsecured	66.14	NA	NA	0.00	0.00
HEART CARE CENTER OF ILLINOIS	Unsecured	72.00	NA	NA	0.00	0.00
HOEVEL & ASSOC	Unsecured	473.00	NA	NA	0.00	0.00
ILLINOIS COLLECTION SE	Unsecured	48.00	NA	NA	0.00	0.00
INGALLS MEMORIAL HOSPITAL	Unsecured	130.33	521.12	521.12	0.00	0.00
INGALLS MEMORIAL HOSPITAL	Unsecured	NA	16,300.42	16,300.42	0.00	0.00
INTERNAL REVENUE SERVICE	Unsecured	0.00	305.30	305.30	0.00	0.00
INTERNAL REVENUE SERVICE	Priority	NA	2,869.54	2,869.54	0.00	0.00
LVNV FUNDING	Unsecured	542.00	650.46	650.46	0.00	0.00
MEMORIAL PHYS SERVICE	Unsecured	63.00	NA	NA	0.00	0.00
MRSI	Unsecured	147.00	NA	NA	0.00	0.00
MRSI	Unsecured	200.00	NA	NA	0.00	0.00
QUANTUM3 GROUP LLC	Unsecured	82.00	245.74	245.74	0.00	0.00
QUANTUM3 GROUP LLC	Unsecured	NA	293.51	293.51	0.00	0.00
Senex Services Corp	Unsecured	537.00	NA	NA	0.00	0.00
ST IL TOLLWAY AUTHORITY	Unsecured	240.00	NA	NA	0.00	0.00
SULLIVAN URGENT AID CENTERS	Unsecured	290.00	113.74	113.74	0.00	0.00
US DEPT OF ED NELNET	Unsecured	10,467.00	101,644.67	101,644.67	0.00	0.00
US DEPT OF ED NELNET	Unsecured	2,092.00	NA	NA	0.00	0.00
US DEPT OF EDUCATION/NELNET	Unsecured	2,207.00	NA	NA	0.00	0.00
US DEPT OF EDUCATION/NELNET	Unsecured	2,252.00	NA	NA	0.00	0.00
US DEPT OF EDUCATION/NELNET	Unsecured	3,500.00	NA	NA	0.00	0.00
US DEPT OF EDUCATION/NELNET	Unsecured	3,500.00	NA	NA	0.00	0.00
US DEPT OF EDUCATION/NELNET	Unsecured	4,500.00	NA	NA	0.00	0.00
US DEPT OF EDUCATION/NELNET	Unsecured	5,000.00	NA	NA	0.00	0.00

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
US DEPT OF EDUCATION/NELNET	Unsecured	5,384.00	NA	NA	0.00	0.00
US DEPT OF EDUCATION/NELNET	Unsecured	5,500.00	NA	NA	0.00	0.00
US DEPT OF EDUCATION/NELNET	Unsecured	6,035.00	NA	NA	0.00	0.00
US DEPT OF EDUCATION/NELNET	Unsecured	7,124.00	NA	NA	0.00	0.00
US DEPT OF EDUCATION/NELNET	Unsecured	7,398.00	NA	NA	0.00	0.00
US DEPT OF EDUCATION/NELNET	Unsecured	7,569.00	NA	NA	0.00	0.00
US DEPT OF EDUCATION/NELNET	Unsecured	8,000.00	NA	NA	0.00	0.00
US DEPT OF EDUCATION/NELNET	Unsecured	10,293.00	NA	NA	0.00	0.00
US DEPT OF EDUCATION/NELNET	Unsecured	1,000.00	NA	NA	0.00	0.00
VILLAGE OF EAST HAZEL CREST	Unsecured	100.00	NA	NA	0.00	0.00
Vision Financial	Unsecured	270.00	NA	NA	0.00	0.00
Vision Financial	Unsecured	281.00	NA	NA	0.00	0.00
WELLS FARGO BANK NA	Secured	NA	16,735.93	15,600.00	0.00	0.00
WELLS FARGO BANK NA	Unsecured	34,456.00	NA	NA	0.00	0.00
WELLS FARGO BANK NA	Secured	130,000.00	159,051.23	175,787.16	0.00	0.00

Summary of Disbursements to Creditors:

	Claim Allowed	Principal Paid	Interest Paid
Secured Payments:			
Mortgage Ongoing	\$175,787.16	\$0.00	\$0.00
Mortgage Arrearage	\$15,600.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$0.00	\$0.00	\$0.00
All Other Secured	\$0.00	\$0.00	\$0.00
TOTAL SECURED:	\$191,387.16	\$0.00	\$0.00
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$2,869.54	\$0.00	\$0.00
TOTAL PRIORITY:	\$2,869.54	\$0.00	\$0.00
GENERAL UNSECURED PAYMENTS:	\$120,456.98	\$0.00	\$0.00

Disbursements:

Expenses of Administration	<u>\$2,900.00</u>	
Disbursements to Creditors	<u>\$0.00</u>	
TOTAL DISBURSEMENTS :		<u>\$2,900.00</u>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 10/04/2016

By: /s/ Tom Vaughn

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.